



# Indiana Department of Education

Dr. Katie Jenner, Secretary of Education

## Testing Irregularity Report: 2021-2022 Assessments

The school corporation/nonpublic school will be contacted if additional information is needed.

### Select ONE testing window:

- ☐ ILEARN 3-8    ☐ I AM    ☐ IREAD-3 Spring    ☐ IREAD-3 Summer    ☐ WIDA ACCESS
- ☐ ISTEP+ Winter Retest    ☐ ISTEP+ Spring Retest    ☐ SAT
- ☐ ILEARN Biology and/or Optional U.S. Government End-of-Course

1) Date: \_\_\_\_\_

Corporation Name and Number: \_\_\_\_\_

School Name(s) and Number(s): \_\_\_\_\_

Person Submitting Report: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

CTC's Printed Name: \_\_\_\_\_ CTC's Signature: \_\_\_\_\_

2) Describe what took place:

3) Explain the steps taken by the school/corporation upon learning about the situation. The explanation should include any actions taken to ensure the irregularity does not occur again:

4) Indicate the number of students/classrooms affected: Students: \_\_\_\_\_ Classrooms: \_\_\_\_\_

5) STN(s): \_\_\_\_\_

6) Session ID (if applicable): \_\_\_\_\_

7) Test Name (e.g., "IREAD-3 Segment 1"): \_\_\_\_\_

8) Indicate testing mode: Online Test \_\_\_\_\_ Paper Test \_\_\_\_\_

9) Were any assessments invalidated? No \_\_\_\_\_ Yes \_\_\_\_\_ (Indicate how many \_\_\_\_\_)

10) Are you requesting follow-up from IDOE? No \_\_\_\_\_ Yes \_\_\_\_\_

11) Add attachment (if needed): \_\_\_\_\_

12) Submit this form via fax (317-233-2196) to: Indiana Department of Education  
Office of Student Assessment  
Attention: Director of Student Assessment

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